## BEST AVAILABLE COPY

1	PATI	ENT APPLIC	ATION.	ÉF DETE	DRAINIATION			, 1 A	polica	tion of Dead		
-	•4	PATENT APPLICATION :-ÉE DETERMINATION RECORD  Effective December 8, 2004							Application or Docket Number			
		CLAIMS AS FILED - PART I						NTITY	1	OTH	ER THAN	
L	S NATIONA	AL STAGE FEES		olumn 1)	(Column 2)		TYPE		C	R SMAL	L ENTIT	
H		IL STAGE FEES					RATE	FEE		RATE	FE	
-	ASIC FEE			ENT. = \$ 150	LARGE ENT. = \$ 30	0	BASIC FEE		7。	R BASIC FEE	-	
E	KAMINATION	FEE 	(4) =	CT Article 33(1)- \$ 50 / \$ 100	All other situations : \$ 100 / \$ 200		EXAM. FEE	1	$\dashv$	EXAM. FEE	100	
SE	ARCH FEE		ALL other	x = \$50/\$100 er countries = 00/\$400	All other situations = \$ 250 / \$ 500		SEARCH FEI	E	1	SEARCH FE		
FE	E FOR EXTRA	SPEC. PGS.		minus 100 =	/ 50 =	7	X \$ 125 =		-	7,000	10	
го	TAL CHARGE	ABLE CLAIMS	6	minus 20 =		7	X \$ 25 =		OF	X \$ 250 =		
NC	DEPENDENT (	CLAIMS	3	minus 3 = .		1	X \$ 100 =	<del> </del>	-			
ИU	LTIPLE DEPE	NDENT CLAIM PI	RESENT			$\dashv$	<b></b>	<del></del>	OF	X \$ 200 =		
1	f the difference	ce in column 1 is	less than z	ero, enter "0"	in column 2	J	+ \$ 180 =		OR	¥ 000	:	
							TOTAL		OR	TOTAL	90	
	<del></del>	(Column 1)	AMENDE	ED - PART (Column			SMALL	ENTITY	OR		R THAN ENTITY	
MINENOMEN I A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU: PAID FO	R PRESENT SLY EXTRA	7	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI	
	Total	*	Minus	**	=	1	X \$ 25 =	100			FEE	
	Independent	*	Minus	***	=	1	ļ	<del> </del>	OR	X \$ 50 =	<b> </b>	
	FIRST PRES	SENTATION OF M	ULTIPLE DE	PENDENT CLA	A104		X \$ 100 =		OR	X \$ 200 =		
							+ \$ 180 =		OR	+ \$ 360 =		
							FEE		OR	TOTAL ADDIT. FEE		
_	<u> </u>	(Column 1)		(Column :	2) (Column 3)			-				
H		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Fotal	*	Minus	**	=	1	X \$ 25 =		OR	X \$ 50 =	FEE	
	ndependent	*	Minus	***	=	ı	X \$ 100 =		OR			
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT CLAI	м	ŀ	+ \$ 180 =			X \$ 200 =		
						L	TOTAL ADDIT.		OR L	+ \$ 360 =		
							FEE L		<b></b>	FEE L		
H t	he "Highest Num	nn 1 is less than the e ber Previously Paid I ber Previously Paid I er Previously Paid Fo	or IN THIS SE	PACE is less than		n the :	300rooriate hov in	1 Column 4				